

ED Diversion: Milwaukee Journal Sentinel

Oct. 4, 2019

"The University of Chicago Medicine is committed to providing high-quality care to patients, their families and the community. The academic health system is also committed to improving the health and well-being of a community that contends with disproportionately high rates of intentional violence and serious chronic conditions and diseases such as asthma, diabetes, high blood pressure, and breast and colorectal cancer. It works closely with its Community Advisory Council, made up of civic and faith-based leaders who advise the institution on issues of concern or interest to the broader community.

UChicago Medicine offers critical and advanced services that cannot be found elsewhere locally or regionally. This includes:

- Level 1 trauma care for adults and children
- A comprehensive stroke center and STEMI-receiving center (severe heart attacks)
- A neonatal intensive care unit that is one of the busiest and largest in the Midwest
- The South Side's only burn unit
- Chicago's only hospital-based emergency helicopter service
- Highly specialized care, such as organ transplantation and high-risk obstetrics

UChicago Medicine has seen tremendous demand for its services over the past decade — particularly as hospitals in the area close their doors or cut service lines, which has had a significant impact on the number of available beds on the South Side of Chicago. As a result:

- UChicago Medicine now is the largest provider of Medicaid patients in the state.
- The medical center has taken steps to better serve the community. In the past five years alone, it has launched adult trauma care, built a larger adult emergency department, opened a Fetal and Neonatal Care Center, and added dozens of beds.
- Its adult emergency department is one of the busiest in the city. ED volume has nearly doubled since 2009, to nearly 75,000 patients in fiscal 2019. It's important to note that 78% of adult ED patients were from the surrounding area and 73% of adult ED patients presented with issues that required immediate intervention or multiple diagnostic tests.
- In fiscal 2018, UChicago Medicine provided more than \$477 million in benefits and services to the South Side, a 3% increase in investment over the previous year.

Patient safety is always the sole determinant in any decision to request bypass status. The medical center requests limited bypass status (also known as ALS diversion) only when patient demand exceeds our capacity to provide safe and effective medical care. This typically occurs when we have a significant number of critically ill patients in the ED, both in the waiting room and waiting to be admitted as inpatients, and when no monitored hospital beds are available. During limited bypass, we continue to take all trauma cases, strokes, heart attacks, cardiac arrests, and patients our EMS partners deem would be harmed by being transported to the next closest hospital. We also continue to provide care to patients who arrive on their own seeking medical care. The medical center continuously monitors its resources and comes off bypass status as soon as we can safely restore full operations.

UChicago Medicine has made a series of changes to safely and compassionately care for patients even during the busiest times. This includes opening additional surge units in the hospital, re-evaluating our bypass status every two hours to more quickly end diversion, and restructuring how we see our sickest ED patients. This work has already helped us decrease the time we spend on limited-bypass status.

While UChicago Medicine will continue these internal efforts, there also needs to be broader systematic change. This includes a much-needed network of high-quality facilities with available patient capacity that can serve the South Side while providing a comprehensive and coordinated system of care that addresses the area's substantial health disparities."

~ The University of Chicago Medicine